

How to Make Your Workplace Tobacco Free



Healthy
Arkansas

*For a Better
State of Health*

Healthy Arkansas

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Why a Tobacco-Free Workplace?

“If a person maintains a normal body weight, exercises at least three times each week and doesn’t use tobacco, that person will live an average of 13 years longer than he or she would live otherwise.”

Governor Mike Huckabee, Arkansas (2004)

Costs to Employers

The costs of employee tobacco use to the employer are significant. Direct costs to the employer include healthcare costs associated with tobacco use. Indirect costs include lost productivity, absenteeism and recruitment and retraining costs resulting from death and disability related to tobacco use.

Tobacco-free workplaces can enhance productivity in two ways: by reducing the effects of secondhand smoke (SHS) on nonsmokers and by reducing excess smoking-related absenteeism among smokers who are motivated to quit as a result of the tobacco-free policy. Especially for small businesses that have employees who handle a variety of tasks, productivity can be greatly increased by reduced absenteeism.

A smoker who quits could save employers an estimated \$960 in excess illness costs each year. Persons who quit smoking before age 65 are estimated to save from 40 percent to 67 percent of the lifetime excess medical costs of persons who continue to smoke.

Tobacco causes more deaths than AIDS, alcohol abuse, automobile accidents, illegal drugs, fires, homicide and suicide combined.

Health Consequences of Tobacco Use and Secondhand Smoke (SHS)

Mortality and Morbidity

- Result in premature death
- Cause significant disease and disability

Cardiovascular Effects

- Cause coronary heart disease (heart attack), cerebrovascular disease (stroke), and atherosclerotic peripheral vascular disease (increased risk of amputations)

Cancer

- Causes lung, laryngeal, esophageal, bladder cancers, as well as cancer of the oral cavity (lip, tongue, mouth and pharynx); smokeless tobacco is also a cause of oral cancer
- A contributing factor for pancreatic and renal cancers
- Associated with gastric cancer

Lung Diseases

- Cause emphysema and chronic bronchitis

Women’s Health Effects

- Cause intrauterine growth retardation, leading to low birth weight babies
- Contribute to cervical cancer
- A probable cause of unsuccessful pregnancies

Other Health Effects

- Addiction to nicotine
- Adverse interactions with occupational hazards that increase the risk of cancer
- Alteration of the actions and effects of prescription and nonprescription medications
- A probable cause of peptic ulcer disease

Health Consequences of Secondhand Smoke

- Causes lung cancer in adult nonsmokers
- Associated with higher death rates from cardiovascular disease in nonsmokers
- Associated with increased irritant effects, particularly eye irritation, among allergic persons
- Worsens asthma in adults

In children

- Associated with respiratory tract infections
- Increased prevalence of fluid in the middle ear
- A risk factor for developing asthma and associated with more frequent and severe asthma attacks
- Associated with increased risk of sudden infant death syndrome (SIDS)
- Associated with increased risk of bacterial meningitis

STEP ONE: Assess the Current Situation

Your first step is to assess the current situation so you know where you are. Review your company's current policies, practices and employee attitudes in regard to tobacco policies.

Use the checklist below.

Current Smoking/Tobacco Use Policy and Practices Checklist

Our current smoking policy allows tobacco use by employees and visitors:

- ☐ In offices
- ☐ In designated smoking rooms
- ☐ Other places inside (list)
- ☐ Just outside the front door
- ☐ In the parking lot
- ☐ In designated smoking areas outside
- ☐ In vehicles
- ☐ Other places outside (list)

Employees and visitors currently use tobacco:

- ☐ In offices
- ☐ In designated smoking rooms
- ☐ Other places inside (list)
- ☐ Just outside the front door
- ☐ In the parking lot
- ☐ In designated smoking areas outside
- ☐ In vehicles
- ☐ Other places outside (list)

Also, review any state or local regulations on tobacco use in the workplace and get a sense of how other businesses in your area approach this issue. Gather and use this information to guide the development and implementation of the policy. Although you are not putting the policy "to a vote," most workers do support tobacco-free policies. Allowing employees to express their opinions will facilitate and guide implementation of the policy.

Support for Employees Who Smoke

The effect of implementing a tobacco-free policy will be most immediate for employees who smoke. You can help them adjust to changes introduced by your smoking policy by communicating the following:

- Inform employees in advance that a new policy is being developed.
- After the policy is implemented, let smokers know that you appreciate their efforts to comply with the policy.
- Offer smoking cessation assistance.
- Ask nonsmoking employees to support and encourage smokers.
- Plan for continuing support of smokers who want to quit.

Of all current smokers, an estimated 32 million (about 70 percent) report they want to quit smoking completely.

Your goal should be a tobacco-free workplace, not to stigmatize employees who use tobacco. Employees who smoke can be offered varieties of assistance plans, from comprehensive programs to more limited referrals. The table below lists some of these types of programs. To tailor a program to fit your company, you can mix and match from these options:

Level of Support	Pros	Cons
Comprehensive		
Offer and pay for smoking cessation programs for employees and covered dependents	May enhance health status of employees	More expensive than other options
	May help contain healthcare costs Allows employer to assess impact of smoking program	Requires a significant effort by the employer
Provide communication to all employees about changes in smoking policies and support to be offered	More likely to yield changes in smoking behavior	
	Demonstrates employer’s commitment to helping employees who smoke	
Facilitation		
Work with health care providers (insurers and Health Maintenance Organizations) to provide smoking cessation for employees	May enhance health status of employees	Requires significant start-up effort
	Takes advantage of existing resources	Health care providers may be unwilling to provide support
Provide self-help cessation materials	Does not require continuing effort or monitoring by employer	
Provide communication to all employees about changes in smoking policies and support to be offered		
Referral		
Provide employees with information on community smoking cessation programs	Takes advantage of existing resources	Less effect on smoking behavior and healthcare costs
Provide self-help cessation materials	Less expensive than comprehensive support	
Provide communication to all employees about changes in smoking policy	Easier to implement than comprehensive support or facilitation	

Incentives

Incentives are most effective in increasing interest in quitting. Even small rewards or recognition, such as in a company newsletter, can help smokers succeed at cessation by providing a concrete goal.

STEP TWO: Decide on a New Policy and Develop a Plan to Implement It

Use the information you have gathered to help you decide which policy you will implement. Compare the current situation with the options for workplace policies. Use the model policy as a reference. You should also consider how to handle other tobacco products, such as spit tobacco or snuff, if the employees use these products. It is reasonable and consistent to handle all tobacco products at the same time and in the same manner.

While many possible smoking policies exist, only two are viable in today's social and scientific environment:

(1) **Tobacco-free** environment in company facilities and vehicles; can be extended to include the property or grounds of the employer.

(2) **Separately ventilated areas.** Smoking limited to separately ventilated smoking rooms.

The following table compares the two types of smoking policies:

Policy	Pros	Cons
1. Tobacco Free		
Smoking/ tobacco use is not allowed inside any building or company vehicle.	Complies with all laws and ordinances	Requires smokers to modify their behavior
	Greatly reduces SHS exposure for all employees	
Tobacco use occurs only at designated outdoor locations. Policy can be extended to prohibit tobacco use on company grounds.	Provides best health and safety benefits for employees	Some costs may be incurred if outside smoking shelters are constructed
		Employees smoking directly outside building impact image
Employees who smoke refrain from smoking throughout the workday or leave company grounds to smoke.	May reduce the number of cigarettes smoked by employees; may encourage employees to quit smoking	Inconvenience to employees who smoke If not properly managed, smokers may be disproportionately absent from their work stations
	Decreases maintenance costs	
	Sends a clear message to employees	
	Easier to administer and enforce	
	Low cost to implement	
2. Separately Ventilated Areas		
Smoking is allowed only in dedicated smoking rooms. The rooms have separate ventilation systems designed to prevent SHS from leaking into other areas of the building.	Complies with most laws and ordinances	May have adverse effects on smokers' health
	Reduces nonsmokers' exposure to SHS	Requires space
	Allows smokers to stay indoors	Ventilation systems may not adequately protect nonsmokers from SHS
		Building and maintaining separately ventilated lounges is expensive

Key Principles of Successful Tobacco-Free Policy Implementation

- Focus on smoke, not the smoker.
- Focus on health and safety regarding tobacco, not individual rights.
- Obtain management commitment and support. This support can be made visible to employees through the use of paycheck stuffers, posters, newsletters and other company communication channels.
- Provide training for middle managers and supervisors on policy communication and enforcement.
- Provide real and visible opportunities for employee participation in policy planning and implementation.
- Educate the workplace community about the hazards of combining SHS and materials used in work processes.
- Allow four to six months from the time of the announcement to implementation, depending on the size of the organization and the magnitude of the change from the old to the new policy.
- To maximize motivation, plan to implement the policy in conjunction with national events such as the American Cancer Society's Great American Smokeout in November or around New Year's Day (when people are making New Year's resolutions).
- Ensure that restrictions and enforcement are equitable across job categories.
- Offer smoking cessation programs to all employees and their families before and after the policy change.
- Enforce the tobacco policy just as any other policy would be. Provide training in enforcement for supervisors. Do not differentiate between smoking breaks and any other kind of breaks.
- Anticipate unintended effects (e.g., the concentration of smoke in designated areas).
- Continue to provide smoking cessation educational opportunities and programs after the policy has been implemented to support employees in their attempts to quit smoking and to prevent relapse.

Items that the company's policy should include:

- ☐ Purpose for policy (harmful effects of SHS on health)
- ☐ A tie between the tobacco policy and cessation support and the recognizable corporate values (e.g., performance of employees as an asset)
- ☐ Clear statement of where tobacco use is prohibited
- ☐ Clear statement of where tobacco use is permitted (if anywhere)
- ☐ Clear statement on enforcement and consequences of noncompliance
- ☐ Clear statement of support to be provided for employees who smoke (e.g., cessation assistance)
- ☐ Name and phone number of person who can answer questions about the policy

Plan how to make the transition smooth and the policy work

This implementation plan will guide the rest of your actions. You may want to tie significant events (such as the effective date of the policy) to existing events, such as the Great American Smokeout (November) or the season (if your smokers will need to go outside to comply, begin during a mild season). The plan should include: when the policy will be announced (at least four months before the effective date; longer for very large organizations); when the policy will become effective; events that will be tied to the transition; supportive activities for smokers; role of contact person listed in policy; role(s) of work groups or task forces; sufficient time for acquiring appropriate signs to communicate the policy; mechanism for allowing employee feedback during the transition period; and time to negotiate and work with labor unions, if needed.

STEP THREE: Communicate with Employees and Management

Once you have composed your plan, you will need to inform your employees about the upcoming changes. Remember to consider the need to involve – or at least communicate with – management and labor unions (if present). It is important that all employees understand the policy changes and the implications of these changes.

Midlevel managers or supervisors need to understand their responsibilities for implementing and enforcing the policies. You may want to hold meetings to familiarize them with their roles. These meetings can be useful in anticipating and preparing for potential problems, such as the abuse of break time or tension between smokers and nonsmokers. The following are questions and suggested talking points or resources about the policy:

Will there be a reduction in healthcare costs at the end of year one?

- It will be difficult to promise savings in healthcare costs within one year.

Note: An accurate assessment of who is using tobacco before the new policy takes effect and a comparison of who is smoking among employees at the end of year can be used to calculate the potential cost benefit of the smoke-free/tobacco-free policy.

Does passive smoking really have any adverse health effects on nonsmokers?

- SHS is a proven health hazard. It has been classified as a Group A (known human) carcinogen, as have asbestos and benzene. Nonsmokers subjected to SHS are exposed to nicotine, carbon monoxide and cancer-causing agents. More people die from SHS than all other regulated occupational substances combined.
- Seek the support of your corporate medical director or a community health professional.

Should employees be allowed to take time away from their job to participate in smoking cessation activities?

- Plan cessation programs at times that are not part of the workday but are convenient for employees (e.g., before work, during lunch or after work).
- Point out that over the long term, time off to attend smoking cessation programs will add up to less time than employees take to smoke.

Will a tobacco-free policy result in the loss of smoking employees?

- Very few employees leave companies because of implementation of smoke-free policies: 3.5 percent of an extensive small business sample and two percent of another sample said employees left due to a smoke-free policy.

Will a tobacco-free policy be difficult to enforce?

- Enforcement procedures are almost never needed because most policies are self-enforcing and compliance is very high. Compliance is high because both management and employees usually support the smoke-free tobacco-free policy.

Will tobacco-free policies alienate clients?

- In most cases, clearly posted signs are enough to alert clients to your smoke-free/tobacco-free policy.
- Some companies hand out a small card explaining the policy.

Won't tobacco-free policies cost too much time and money to implement?

- Experience and limited survey data have demonstrated that developing and implementing a tobacco-free policy does not need to be expensive or time-consuming. Costs and time can be saved with well-thought-out implementation.

STEP FOUR: Announce and Manage the Policy

Formally announce the policy to all employees and prepare for implementation. Suggested actions include the following:

- Announce the policy and cessation support by using your company's standard communication channels. It is important to demonstrate that management fully supports the policy (e.g., the announcement should come from the chief executive officer or appropriate senior officer).
- Announce a timeline for implementing the tobacco policy and cessation activities. The announcement should be made in advance of the policy's effective date to allow tobacco users to prepare for changes and to permit any facility or material changes that might be necessary such as removal of cigarette vending machines, placement of outdoor ashtrays and "Smoke-free Area/Thank You for Not Smoking" signs and necessary ventilation modifications.
- Offer smoking cessation support at the same time as the advance announcement of the pending policy change as well as before and after the effective date. Strong restrictions on smoking may encourage smokers to think about quitting.
- Obtain signs that communicate a positive "smoke-free" message.
- Offer to answer employee questions and invite comment about the policy and cessation activities.
- On the effective date of the policy, you should have signs in place, facility changes complete and smoking cessation and smoker support ready.

Take advantage of the time between the announcement and the policy effective date to anticipate issues that may arise and work to resolve them.

Don't stop after the effective date of the policy

As with other policies, the implementation of the smoke-free policy needs to be monitored for effectiveness. Monitoring allows you to tailor implementation and related cessation support and it allows you to report to management and employees about the impact of the policy.

Plan to assess your policy by finding the answers to the following:

Assessment in the short-term (first one to three months)

- Changes in exposure to SHS in the work environment
- Number of employees attending cessation activities or using self-help materials
- Awareness of the policy
- Employee attitudes toward policy and cessation activities
- Improved employee morale
- Less conflict between smokers and nonsmokers
- Enhanced quality of work
- Improved job satisfaction

Assessment in the long-term (three months to a year)

- Changes in number of employees who use tobacco
- Effect of cessation activities on successful quitting
- Changes in health risks for smokers and nonsmokers
- Enhanced corporate image
- Improved employee attitude toward health
- Reduced absenteeism
- Reduced healthcare costs
- Lower accident rate
- Decline in turnover
- Fewer sick days
- Improved productivity

You also may want to evaluate your policy over the longer term (e.g., one to three years). This step will require more effort and time, but it can provide valuable information, such as awareness of tobacco policy and smoking cessation activities, participation in smoking cessation activities, effectiveness of smoking cessation activities, and management support and tobacco policy enforcement.

Assess whether your tobacco policy and cessation support are working

Here are some other reasons for evaluation of tobacco policies and cessation activities:

- To identify areas for modification
- To tell employees and management what happened
- To provide a structure for the evolution of the policy or activities

All policies and activities need to evolve to meet the changing needs of the organization and employees. Assessment data can help you to justify changes in the policy or activities to meet these changing demands. You will need to tailor the concepts so that they will work in your setting, but these steps have been tested and proven in various environments.

Resources

This page provides information on some of the resources available for use in worksites.

The sources of materials are listed rather than all of the available materials. Included here are nonprofit and governmental providers that have developed excellent materials and programs at low or no cost. These sources can provide information to help you develop your policy (such as fact sheets on the risks from secondhand smoke) or smoking cessation support. Ask these sources about materials on policy and cessation at the same time.

Arkansas Department of Health Tobacco Prevention Program

4815 W. Markham Slot # 3

Little Rock, AR 72205

(501) 661-2953

ADH Smoking Quit Line:

(1-866-669-7848)

www.healthyarkansas.com

www.stampoutsmoking.com

The American Cancer Society

901 N. University Ave.

Little Rock, AR 72207

(501) 603-5216

www.cancer.org

The American Heart Association

909 W. 2nd Street

Little Rock, AR 72203

(501) 375-9148

www.americanheart.org

The Lung Association

211 Natural Resources Drive

Little Rock, AR 72205

(501) 224-5864

www.lungark.org

National Cancer Institute

9000 Rockville Pike

Building 31, Room 4A-18

Bethesda, MD 20892

(1-800) 4-CANCER

NCI's Smoking Quit Line

(1-877-448-7848)

www.nci.nih.gov/cancerinfo/tobacco

National Institute for Occupational Safety and Health Centers for Disease Control and Prevention

4676 Columbia Parkway

Cincinnati, OH 45226

(1-800-356-4674)

Office on Smoking and Health

Centers for Disease Control and Prevention

4770 Buford Highway, NE

Mailstop K-50

Atlanta, GA 30341-3724

(770) 488-5705

www.cdc.gov/nccdphp/osh/tobacco



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Healthy Arkansas Tobacco Free Worksite

Arkansas Department of Health

4815 West Markham St., Slot 41

Little Rock, AR 72205

1-800-235-0002

www.arkansas.gov/ha

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